

<b>MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET</b> (FOR USE WITH FORM PTO-875)							SERIAL NO. <b>0974422</b>	FILING DATE <b>4/24/01</b>				
							APPLICANT(S)					
CLAIMS												
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT							
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
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TOTAL IND.	4		2									
TOTAL DEP.	11											
TOTAL CLAIMS	15											
* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS												
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